# Common reactions and possible responses to children and youth with traumatic experiences

**What you might notice:** Any changes in how children and youth react to people or situations, or any abrupt changes in their overall behavior.

## What you can do:

**Observe.** Share your observations in a very neutral way, and ask if they want to talk about it. For example:

I've noticed when we pick you up from school, you seem to be angry. Is there something happening at school that is upsetting?
I've noticed that you seem to be afraid when I take you to visit (fill in the blank with person or place as needed). Is something happening that makes you afraid?
What are you most worried about right now?

**Engage children.** Support children in finding a way to share by engaging them in play or a sensory activity. Something as simple as blowing bubbles, listening to music, or drawing can help them to become calm and relaxed. As a result, they may feel a little bit more comfortable saying or indicating what they want or need.

**Don't push.** If the child becomes upset, don't probe or push the issue, but don't drop it either. Find another way to get information. Talk to other people, or approach the child another time.

**Follow up.** Talk to other people in the child's life and see if they have noticed the same changes. Follow up and report to Child Protective Services or the police if you have <u>any</u> concern about current abuse.\*

What you might notice: Withdrawal and isolation

## What you can do:

*Offer choices.* Regularly offer the child or youth choices about their day-to-day activities, which can help them gain a sense of control.

*Talk.* Talk to the child without pushing or probing. Talk to them whether or not they can respond verbally to what you are saying.



**Look for signs.** Watch closely for signs of re-enactment of abuse. Examples include signs of sexuality that are advanced for their age or being abusive to other children, animals, or adults.

**Keep connections.** In a residential setting, identify one or more staff members the child has a connection with, and ask them to regularly check in.

Page | 2

**Offer time and space.** Offer children/youth space and time to process. Let them know you are available when they are ready to engage.

**Plan activities.** Encourage children to continue regular social and recreational activities.

What you might notice: Heightened fear, anxiety, and/or depression

#### What you can do:

**Provide predictability.** Children who have been traumatized can be comforted by having predictable schedules and trustworthy caregivers.

**Protect the child.** Don't hesitate to stop activities that are upsetting or traumatizing, and look into relationships that concern you.

**Provide caring emotional support** and simple, kind gestures, such as asking: How are you today? Is there anything you need?

**Provide comfort.** Different children are comforted by different things: emotional support, a movie, familiar foods, or a private space.

**Be creative.** Again, offer options for children to express difficult feelings through art, music, dancing, writing, exercise, sports.

**Provide physical safety** for children. Children may not feel safe with the people they live with or who provide services to them. Traumatized children who live in a group setting may trigger each other's heightened fear responses, which can result in chaos. Watch for mismatches in roommates or residential houses. As needed, make changes to increase the child's sense of safety where they live.

What you might notice: Increased anger and aggression when a child's emotional stress is escalated.

#### What you can do:

**Promote safety.** When a child becomes angry or aggressive, a common instinct for adults is to try to control or contain the behavior. It's more important to allow spaces for large and strong emotions. Help the child begin to feel safer when they feel out of control. This approach can help them regulate emotions.

Page | 3

**Offer time and space.** When a child is really upset, it is not a teaching moment. Children often react with anger and aggression when they are afraid or ashamed. It's rather time to give space, to soothe and encourage, or to allow for a time of reflection. Avoid power struggles.

**Provide a calm setting.** Remove the child from sensory overload. Create a safer and calmer space away from loud noises, bright lights, and visual stimulation.

**Keep calm.** Adult stress can be reflected in and increase a child's stress. Adult calmness, on the other hand, can help children reduce their own distress. Lower your voice, keep eye contact, and maintain relaxed and friendly body language.

**Strategize with children.** When they are no longer distressed, strategize with the child about what was going on and what would be helpful to do next time.

**Model effective use of anger.** Make sure when you are angry that you express it appropriately and ask assertively for what you want to change the situation.

**Share anger warning signs and triggers.** When adolescents and teens can identify the warning signs that their temper is starting to boil, it allows them to take steps to defuse the anger themselves before it gets out of control.

**Watch for self-harm.** Likewise, recognize that some children do not outwardly express anger. Instead, they may hold it in and begin hurting themselves by using drugs, over/under eating, or other forms of self-harm.

**Add activity.** Get the child engaged in choosing an activity they would enjoy that could help relieve anger, such as running, biking, boxing, dancing, writing, drawing, meditation, or participating in team sports.

**Encourage expression.** Adolescents exposed to trauma may feel self-conscious about their emotional reactions and worry about how these feelings make them different from their peers. Encourage teens to express his or her feelings about the event.

**Provide retreat space.** Give adolescents and teens space to retreat. Don't try to force the healing process.

Common reactions and possible responses to children and youth with trauma histories

#### Ask questions:

- o What is bothering you?
- o What are you most worried about?
- o Can you tell what is bothering you?
- o What do you think you should do?
- What can I do to support you? (And then follow through.)

Page | 4

(Adapted in part from Fallot, 2011; Harvey, 2012; Robinson & Segal, 2017)

### \*To report child abuse in Texas:

For emergencies or if the child is currently in danger, always call 9-1-1.

Report any nonemergency suspicion of abuse, neglect, or exploitation to the statewide child abuse intake line 24 hours a day, seven days a week: 1-800-252-5400.

For situations that do not require immediate investigation, you can report <u>online</u> at <a href="https://www.txabusehotline.org">https://www.txabusehotline.org</a>

#### Resources

Fallot, R.D., (2011). Paper presented at Institute of Medicine Conference. Washington, DC.

Harvey, Karyn. (2012, February 20). *Trauma-informed care for people with intellectual disabilities and behavioral health challenges*. Presentation at the Hogg Foundation for Mental Health, Austin, Texas.

Robinson, L., and Segal, J. (2017, April). *Help for parents of troubled teens.* Help Guide. <a href="https://www.helpguide.org/articles/parenting-family/helping-troubled-teens.htm">www.helpguide.org/articles/parenting-family/helping-troubled-teens.htm</a>

This project was funded by the Texas Center for the Judiciary through a Children's Justice Act grant.

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